



**Draft Minutes of the Governor's Interagency Council on Health Disparities
September 11, 2013**

**Department of Health, Point Plaza East, Rooms 152/153
310 Israel Road S.E., Tumwater, WA 98501**

HDC members present:

Sofia Aragon
Marietta Bobba
Gail Brandt
Vazaskia Caldwell
Nora Coronado
Willie Frank

Nova Gattman
Frankie Manning, Vice Chair
Emma Medicine White Crow, Chair
Millie Piazza
Gwendolyn Shepherd
Greg Williamson

HDC members absent:

Kim Eads
Jonathan Green
Winona Hollins-Hauge

Diane Klontz
Steve Kutz

HDC Staff present:

Michelle Davis, Executive Director
Timothy Grisham, Communications Consultant
Christy Hoff, Health Policy Analyst

Yris Lance, CLAS Project Manager
Desiree Robinson, Executive Assistant

Guests and Other Participants:

Mary Beth Brunke, Walgreens
Christine Espina, Washington Center for
Nursing
Dawn Hanson, Public Participant
Adrian Hodos, Cross Cultural Health Care
Program
Jackie LeSage, Samoan National Nurses
Association
Frances Limtiaco, Washington State
Department of Health
Mikaela Louie, Cross Cultural Health Care
Program

Rebecca Louie, Cross Cultural Health Care
Program
Yolanda Lovato, Department of Social and
Health Services
Don Martin, Department of Health
Jason McGill, Governor's Executive Policy
Office
Sarah Rafton, Seattle Children's Hospital
Alison Robbins, Health Care Authority
Janet St.Clair, Asian Counseling and Referral
Service
Evan Stults, Qualis Health

Emma Medicine White Crow, Council Chair called the public meeting to order at 10:07 a.m. She acknowledged that it was September 11, and asked to take a moment to remember those who lost their lives on that date. She thanked everyone for coming and read from a prepared statement (on file). She facilitated introductions of Council members, staff, and members of the public.

1. APPROVAL OF AGENDA

Chair Medicine White Crow said there would be a change to the agenda. Jason McGill from the Governor's Office asked to present earlier than originally scheduled. She proposed swapping agenda items 4 and 7.

***Motion:** Approve September 11, 2013 agenda as amended to switch agenda items 4 and 7.*

***Motion/Second:** Frankie Manning/ Marietta Bobba. Approved unanimously.*

2. ADOPTION OF MAY 8, 2013 MEETING MINUTES

***Motion:** Approve the May 8, 2013 minutes*

***Motion/Second:** Frankie Manning/ Vazaskia Caldwell. Approved unanimously.*

3. ANNOUNCEMENTS AND COUNCIL BUSINESS

Christy Curwick Hoff, Council Staff referred Council members to a letter of support under Tab 3, which was provided to the Group Health Research Institute for a proposal to study asthma care improvement in the Yakima Valley. She said since the last meeting, the Office of the Governor approved the Council's 2013 Update report, which is now available on the Council's web site. She shared that funding for health impact reviews was reinstated in the 2013 biennial budget and the Board was in the process of hiring for the position. She thanked Member Brandt for serving on the interview panel and assisting with recruitment. She introduced Nova Gattman, Council member representing the Workforce Training and Education Coordinating Board.

4. BRIEFING—GOVERNOR'S HEALTH PRIORITIES

Chair Medicine White Crow introduced Jason McGill, Health Policy Advisor for Governor Jay Inslee's Legislative Affairs & Policy Office. She said she hoped to develop a stronger relationship with the Governor's Office. Mr. McGill shared information about Results Washington, which was launched by the Governor's Office yesterday. He shared a current draft of measures and indicators for [Goal 4: Healthy and Safe Communities](#). He said they were in a period of taking public comment on the proposed framework. He said he was impressed with the Council's 2013 update to its 2012 action plan and was happy that agencies were in the process of implementing recommendations.

Gail Brandt, Council Member, asked how Governor Inslee would take input and refine the Results Washington process. Mr. McGill said the public could provide comments online via an email form. Greg Williamson, Council Member, thanked Mr. McGill for highlighting the interrelationships between the goals – for instance education and health. He highlighted the collaborative work on childhood obesity prevention between the Department of Early Learning, Department of Health, Office of Superintendent of Public Instruction, and the Governor's office. He asked about the Governor's interest in a health-in-all-policies approach—such as how health would be incorporated into the other goals or within non-health agencies' data systems. Mr. McGill agreed there is an opportunity to look for linkages, highlighting the connections between education, poverty, the environment, and health. Vazaskia Caldwell, Council Member, asked if the Governor's Office worked with community stakeholders in developing the framework. She highlighted the provisions in the Affordable Care Act that were specific to eliminating health disparities and said support for the implementation of those equity provisions would move us in the right direction. Member Brandt said the US Census would soon be releasing 2012 poverty data, including data on income disparities and asked if the Governor's office had plans to respond to it in any way. Mr. McGill agreed that the income gap was a huge indicator of community health but said he did not think a response to a document like that was something the Governor would typically do. Frankie Manning, Council Vice

Chair, reiterated the need to integrate across the different Results Washington goals. She said she was interested in how we can increase graduation rates among youth in prison. Nova Gattman, Council Member, asked if there were strategies within Results Washington related to school lunch programs, e.g., farm to school. Member Williamson said those topics were being addressed under the childhood obesity prevention initiative. Mr. McGill added that Arkansas was a leader in developing and implementing strategies to prevent childhood obesity. Member Williamson said OSPI has been working with the organizations that manage school stores, which provide competition to school lunch programs, to encourage them to offer healthier options. Vice Chair Manning discussed her interest in improving diversity within the health professions.

Chair Medicine White Crow said the Council wants to highlight the good work being done by the agencies and commissions at the table. She said Council meetings serve as a way to learn from others and take good ideas back to our respective agencies. Mr. McGill said that on October 1, we have an historic opportunity to enroll people who have never had insurance and help them to engage in the healthcare system. He said that was an example of what we can do immediately to work together. He added that the Council is doing a great job with its recommendations and implementation and the Governor's office is reviewing them and using its reports.

5. BRIEFING—STATE PARTNERSHIP GRANT, IMPLEMENTING NATIONAL CLAS STANDARDS IN WASHINGTON STATE

Chair Medicine White Crow invited staff to give their presentation. Ms. Hoff said the Council's grant, which supported outreach and community engagement work ended on August 31. She said they were able to apply for and were successfully awarded a new two-year grant; however, restrictions on what the new grant could be used for prohibited them from submitting a proposal to maintain their community outreach activities. She said the new grant offered an opportunity to promote the National Standards on Culturally and Linguistically Appropriate Services in Health and Healthcare (CLAS Standards). Ms. Hoff introduced Don Martin, Senior Health Educator with the Department of Health and Yris Lance, Council Staff. Mr. Martin gave an overview of the National CLAS Standards and Ms. Lance shared information on the grant project (presentation on file).

Member Caldwell asked for clarification about how staff would track implementation of CLAS standards during the grant. Ms. Hoff said they would track whether the organization has a written policy and would use an assessment tool to determine the degree to which the standards are being implemented. Sofia Aragon, Council Member, thanked Mr. Martin and Ms. Lance – she said the handouts provided (on file) were helpful in providing practical guidance and concrete examples to organizations that want to improve services but don't know how to operationalize the concepts of providing culturally and linguistically appropriate care. Gwendolyn Shepherd, Council Member, and Chair Medicine White Crow spoke about the importance of plain talk and sharing information at a level appropriate for the audience. Chair Medicine White Crow stressed the need to focus on culture and ensuring resources and services are provided in culturally appropriate ways. Vice Chair Manning highlighted the importance of diversity in leadership positions. She said partnerships with the medical and nursing associations were important but emphasized the need to link with the educational system to secure interest in the health professions among students early in life.

The Council recessed for lunch and reconvened at 1:05 p.m.

6. PUBLIC COMMENT

Chair Medicine White Crow opened the meeting up for public comment and read from a prepared statement (on file).

Michaela Louie, Manager of Cultural Competency Training and Consulting at the Cross Cultural Health Care Program, said she hoped to reconnect with the Council. She said the Cross Cultural Health Care Program provides “Bridging the Gap” medical interpreter training. She their cultural competency training includes new modules on the social determinants of health, the Affordable Care Act, and the CLAS standards. She said her organization consulted on an American Medical Association organizational assessment tool. The tool is designed for hospitals but can be used by public health and social service agencies and is fully aligned with the enhanced CLAS standards. She said they are also developing a new training for patient guides, which will provide medical interpreters with additional training to be patient guides.

Evan Stultz, Communications Director at Qualis Health, said his organization is a nonprofit healthcare organization that provides health care quality improvement services for the state. He said one of their new priorities is to investigate and reduce unnecessary hospitalizations in Medicare. Qualis staff has been providing data on hospital readmissions to health organizations, including disaggregated data by race/ethnicity. They have found in all communities the rate of hospitalizations for non-whites exceeds that of the white population. They have had some exciting dialogue with their stakeholders and will be hosting a meeting to discuss further in November. The focus will be on how to ensure effective care coordination at hospital discharge. He said he will share the meeting invitation when they have more details.

Christine Espina, Diversity Network Director with the Washington Center for Nursing, announced that the Center is about to celebrate its 10th anniversary. She said her role is to promote diversity and inclusion in the nursing workforce and she has been working to develop and launch a mentoring program. She said they are actively recruiting mentors and mentees. The program is partnering with health systems across Western Washington and they hope to expand across the state next year. Member Caldwell suggested they partner with Multicare’s nurse camp.

Janet St. Clair, Asian Counseling and Referral Services, said she had three questions about the implementation of CLAS standards. Her first question was about how organizations can assure fidelity to programs while adapting to ensure the programs are culturally and linguistically appropriate. She also asked about how the CLAS standards will align with the State Health Care Improvement Planning work being led by the Health Care Authority in partnership with the Governor’s Office and other state agencies. Her final question was how to measure and enforce that CLAS standards are being followed in provider contracts. Member Aragon said it is important to ensure CLAS standards are considered when implementing evidence-based practices. Ms. St. Clair added that practice-driven research is important in communities of color. She said evidence-based practices can be adapted in appropriate ways so that the practice still has fidelity. She also stressed the importance of having culturally modified materials so they are meaningful for the specific community. She said evidence-based practices are clearly important but that cultural and linguistic adaptations need to be considered at the state level.

Jackie LeSage, Samoan National Nurses Association, said was hoping to have a member of the Marshallese community come to speak to the Council. She said the children attending the school system in Spokane are more likely to speak Marshallese than Spanish. She wanted to share some of

the needs and concerns of this underserved community – they have challenges with accessing health care in Washington State.

Dawn Hanson, public participant, said she lives in the Highlands Neighborhood on the Columbia River in Cowlitz County. She referenced a letter she wrote about an environmental justice issue in her neighborhood (on file under Tab 6). She provided demographic information on the community and mentioned some of the toxic release sites in the neighborhood. She said there are now plans to subject the neighborhood to a coal terminal. This is a community with disproportionately high mortality rates. She thinks this issue deserves the attention of the Council and she invited someone from the Council to come to the hearing. Willie Frank, Council Member, said the Nisqually Tribe and other Tribes have been involved as well. Millie Piazza, Council Member, said she brought a flyer announcing the public meeting. She also referred Council members to the Department of Ecology website where they have information on a public comment period.

7. DISCUSSION—FUTURE DIRECTIONS FOR COUNCIL OUTREACH AND ENGAGEMENT

Chair Medicine White Crow referred Council members to the memo in their packets. Ms. Hoff provided background information on the Council's past grant projects from the Office of Minority Health. She discussed the kinds of outreach and engagement efforts they had been able to support through past grants and reiterated that the new grant project would not be able to support those outreach efforts. She said they would need to develop new strategies to continue outreach and engagement efforts and talked about the continuum of community engagement from information sharing to true collaborative decision-making. Timothy Grisham, Council Staff, gave his presentation, which provided demographic data on social media use (presentation on file). Mr. Grisham shared plans to create some new outreach channels through social media and the Council's web site. He stressed that the new Internet communication strategies would not be able to replace the face-to-face outreach and engagement with community but could be used to supplement efforts and to reach potentially new audiences.

Member Brandt asked about the process for determining what information would be posted to the web site. Ms. Hoff said the process would not change. She said Council members were welcome to share information, meeting notices, resources, and other items with staff for posting to the web or distribution through Facebook or Twitter. Member Brandt asked if we would be able to continue to meet the informational needs of the communities that we have engaged with in the past. Ms. Lance and Mr. Grisham reiterated that we will not be able to reach everyone with social networking. They stressed that without dedicated outreach funding, the Council will need to find creative ways to reach people. Ms. Hoff said she hoped to continue the discussion and asked members to consider how we can all work together—members and staff—to collectively provide outreach and engagement by leveraging resources and opportunities where we might already be providing information to or engaging communities in the work we do. Member Williamson suggested that we also work with students and student groups to share information and resources.

8. BRIEFING—RESOURCES FOR NAVIGATING THE HEALTHCARE SYSTEM FOR THE NEWLY INSURED

Chair Medicine White Crow said Council members initiated a conversation at the last meeting about how individuals who receive insurance for the first time under the Affordable Care Act will be able to effectively navigate the complex health care system. She said this agenda item would allow the Council to continue that conversation. Member Caldwell shared background information on four

patient navigator pilot programs that began in 2008. She said patient navigators are members of the community they serve who are knowledgeable about the health care system. They assist patients by coordinating services, improving communications, and resolving problems. Sarah Rafton, Seattle Children's Hospital, provided information on the patient navigator program at Seattle Children's. She highlighted evaluation data that demonstrated the program's success in reducing missed outpatient appointments, increasing completed specialty referrals, reducing inpatient admissions and length of stays, and increasing the appropriate use of professional interpreters. Alison Robbins, Health Care Authority, provided information on the Washington Apple Health managed care program. She highlighted the care management and care coordination assistance provided through Apple Health as well as informational resources provided to patients. Yolanda Lovato, Department of Social and Health Services, provided a presentation on HealthPath Washington, which is a program aimed at integrating Medicare and Medicaid services. She shared the two strategies being employed (health homes and full integration capitation) and the care coordination and support services provided by each. All presentations are on file under Tab 8. Vice Chair Manning thanked the presenters and said they provided a lot of good information to think about.

9. DISCUSSION—FUTURE PRIORITIES

Chair Medicine White Crow referred Council members to the memo under Tab 9 and said the Council started the conversation about selecting new priorities at its last meeting. She said today we had an opportunity to hear about Governor Inslee's priorities and she referred members to a list in their packets of all the health topics that have previously been considered, including those that have been selected in the past. She said that she hoped they would identify some new priorities by the end of the day's discussion.

Member Brandt said a priority for the Department of Health was childhood obesity (healthy weight). She also suggested examining the state's regressive tax structure or identifying a focus on maternal and child health. Nora Coronado, Council Member, suggested a focus on environmental health issues that disproportionately affect Latinos. Marietta Bobba, Council Member, suggested a focus on the health disparities in our foster care system. Member Williamson said OSPI works with students in foster care, students affected by homelessness, and students affected by military deployment. He agreed with a focus on these vulnerable children. He also stressed the importance of academic achievement and reducing dropout rates. He suggested a focus on the "second decade", i.e., the behavioral choices that kids make between 10-20 years of age. He said unhealthy choices that children make are often symptoms of underlying problems. Gwendolyn Shepherd, Council Member, said we are underusing our senior population. She said we should look at retooling and refurbishing seniors who want to be involved in improving the health of their communities. Member Caldwell said obesity and diabetes are still real problems that affect many populations and we need to keep those as priority areas until we have made real strides in reducing disparities. She said she liked the recent approach taken by the Council of focusing on state actions that can be done to reduce disparities and holding agencies accountable for implementing Council recommendations. Chair Medicine White Crow agreed that there are more opportunities to address obesity and diabetes since a greater proportion of our population will have access to health insurance. Member Gatman said it might be interesting for the Council to focus on work-integrated learning (i.e., education and training supported by one's employer). She said this approach could be used to improve the diversity of the healthcare workforce by enabling people with entry-level jobs to move up the career ladder. She said she would brainstorm ways for the Council and the Health Care Personnel Shortage Task Force to work together. Member Brandt said it would be helpful to have guidelines for choosing priorities. She also suggested focusing on a few priorities where we have opportunities to partner with others.

Vice Chair Manning said she hoped we'd be able to align our work with the Governor's priorities and she highlighted some of the indicators in the Results Washington handouts that focused on increasing immunization rates and the percentage of people with healthy weight. She said agencies would be working on the Governor's priorities so there would be plenty of opportunity to collaborate with others. Vice Chair Manning clarified that we wanted to identify some new priorities at this meeting. She said immunizations, infant mortality, and adverse childhood experiences (ACES) were important topics to her, stressing the need to keep kids healthy. Member Bobba said with the military presence in Washington, we have a lot of grandparents raising grandchildren. She also said she hoped we would work toward ensuring cultural competence in state services, including an expectation that contractors would also adopt cultural competence policies and practices. Member Williamson advised that we should focus on a priority area that we are uniquely situated to address. Vice Chair Manning agreed and said we could contribute an equity lens to current priority areas. Member Caldwell said implementing the CLAS Standards as a priority would be a good focus because it is something all agencies can and should be doing. She stressed that providing culturally and linguistically appropriate state services should be the foundation for what the Council does. She said all agencies could report on progress with adopting and implementing the standards. Chair Medicine White Crow said it would offer the opportunity to collaborate, partner, and support each other across agencies. Member Piazza agreed with each representative holding their agencies accountable for implementing the CLAS standards. She emphasized the need to continue to find tangible ways of implementing current priorities as well. Member Williamson suggested appointing a subcommittee to come back to the December meeting with a proposed set of priorities. Chair Medicine White Crow said she thought a consensus was building around tracking progress toward the implementation of CLAS standards. There was general agreement to prioritize the implementation of CLAS standards. In addition, the following members volunteered to meet in the interim to bring back a proposal for future priorities at the December meeting: Members Caldwell, Bobba, Brandt, and Chair Medicine White Crow.

***Motion:** The Council selects the implementation of the National CLAS Standards as a priority and will convene an ad hoc workgroup of members to develop a proposal for additional priorities to bring back to the full Council for its consideration at the December 11, 2013 meeting.*

***Motion/Second:** Vazaskia Caldwell/Frankie Manning. Approved unanimously.*

10. COUNCIL MEMBER COMMENTS

No comments taken at this meeting.

ADJOURNMENT

Chair Medicine White Crow adjourned the meeting at 4:30 p.m.